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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no met	STATE OR COUNTRY OR	SHEETS DRAWING 15	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Allowance Examiner's Signature <i>[Signature]</i> Initials <i>SHS</i>				

ADDRESS

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TITLE

SUPPORT FIXTURE FOR FOOD PLATE AND BEVERAGE CONTAINER

FILING FEE RECEIVED 417	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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